

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

R.I. DEPT. OF STATE BUS SYCS DIV

2017 JUL 27 AM 8:55

## Annual Report for the year: 2016 Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

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1. Entity ID Number	2. Exact name of the Limited Liability Company				
569149	Organic Grow Hut, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
81 - Other Services (except Pi	Gardening				
5. State of Formation					
Rhode Island					
6. Principal Office Address			City	State	Zip
375 Putnam Pike #13			Smithfield	RI	02917
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Timothy Gagnon			Contact Title Member		
Street Address 6 Sweet Road			City Smithfield	State RI	<sup>Zip</sup> 02917
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person Timothy Gagnon Date 7-25-(2)					
Signature of Authorized Pelson					
- Linally Lagron SIGN DOCUMENT HERE					

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

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